

March 11, 2020

The Honorable Seema Verma
Administrator
Centers for Medicare & Medicaid Services
7500 Security Boulevard
Baltimore, MD 21244

Dear Administrator Verma:

On behalf of the Medicaid Health Plans of America (MHPA), the leading national trade association representing Medicaid managed care organizations, I am writing to urge the Centers for Medicare and Medicaid Services (CMS) to take immediate action to enhance states' capacity to address the impact of COVID-19, a public health emergency that presents a serious threat to the more than 70 million Americans that rely on the Medicaid program for high-quality health coverage and care.

MHPA's 90-member health plans serve more than 23 million Medicaid beneficiaries in 36 states. MHPA's members include both for-profit and non-profit, national and regional, as well as single-state health plans that compete in the Medicaid market. Nearly three-quarters of all Medicaid beneficiaries receive health care through MCOs, and our association provides research and advocacy services that support policy solutions to enhance the delivery and coordination of comprehensive, cost-effective, and quality health care for Medicaid beneficiaries.

As you know, Medicaid is an essential and effective source of care for the most vulnerable populations in our country. MHPA and our member health plans know that individuals served by Medicaid include populations that are especially vulnerable to the spread of viral diseases like COVID-19, particularly older adults and individuals with chronic, underlying health conditions. To expand immediate access to care and services during this public health emergency due to the ongoing spread of COVID-19, MHPA requests that CMS issue a State Medicaid Directors (SMD) guidance letter encouraging states to utilize existing flexibilities and that CMS exercise any applicable emergency authority to remove barriers and expedite access to testing and treatment for COVID-19. Specifically, MHPA recommends that this SMD letter address, at a minimum, the following issues:

- Cost-sharing. Emphasizing the public health value of removing all cost-sharing, including for treatment in emergency departments and for prescription drugs, for Medicaid enrollees that have or are suspected of having COVID-19;
- Telehealth policies. Detailing how states can implement or update their Medicaid telehealth policies, including for remote monitoring, and reimburse telehealth services at an in-person clinical service rate;
- 90-day Rx supply. Allowing, to the extent possible, for a 90-day supply of medications at retail and mail-order pharmacies for medications where a 90-day supply is clinically appropriate (i.e. this should not include opioid prescriptions), and also allow the waiving of early refill requirements during public health emergencies;

- Facility/Nursing home staff training. Clarifying whether the use of a portion of available federal and state COVID-19 emergency response funds can be used to immediately train long-term care facility and nursing home staff on prevention and treatment of COVID-19;
- Beneficiary/Enrollee engagement. Describing how states can best engage Medicaid enrollees directly, or in collaboration with their MCO partners, on CDC best practices for infection control and medical management;
- Care management flexibility. Providing additional flexibility to use other communication methods (such as the phone) for currently required face-to-face care management meetings;
- Home delivery options. Suggesting ways for how states can better work with their MCO partners and community-based organizations, including home-delivery services, to provide non-medical supports such as meals and over the counter medications, to Medicaid beneficiaries who are self-quarantined in their homes;
- Employer engagement. Encouraging states to educate employers about the importance of allowing workers diagnosed with COVID-19 to stay at home; and
- Sample Materials. In conjunction with the Centers for Disease Control and Prevention, providing states with sample written information on COVID-19 appropriate for distribution to Medicaid beneficiaries as well as for use by MCO's disease management and engagement staff and vendors.

Thank you for your consideration of this request and for your leadership on this public health emergency, including your participation in the President's Coronavirus Task Force. MHPA is committed to continuing to work tirelessly with you and your staff, states, and local governments, as well as providers and other partners to ensure the response to COVID-19 recognizes the needs of the more than 70 million Americans that are enrolled in the Medicaid program. If you have questions on this issue, please feel free to reach out to me directly at (202) 857-5771, or direct them to Shannon Attanasio, Vice President, Government Relations and Advocacy at (202) 857-5723 or (sattanasio@mhpa.org).

Sincerely,



Craig A. Kennedy, MPH
President and CEO
MHPA